

Approved for use through 9/30/98. CMB 0551-0032
Patent and Trademark Office, U.S. DEPARTMENT OF COMMERCE
disclosure of information unless it contains a valid CMB control number.

DO NOT SEND FEE OR COMPLETION FEE TO THE CHIEF INFORMATION OFFICER, PATENT AND TRADEMARK OFFICE, WASHINGTON, DC 20590.

RECEIVED

AUG 09 2001

TECH CENTER 1609/2908

Please type a plus sign (+) inside this box → ☐Approved for use through 9/30/98. GAO 0651-01
Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

DECLARATION

I hereby claim the benefit under Title 35, United States Code §120 of any United States application(s), or §365(c) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of Title 35, United States Code §112, I acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulations §1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.

U.S. Parent Application Number	PCT Parent Number	Parent Filing Date (MM/DD/YYYY)	Parent Patent Number (if applicable)

☐ Additional U.S. or PCT international application numbers are listed on a supplemental priority sheet attached hereto.

As a named inventor, I hereby appoint the following registered practitioner(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith:

Name	Registration Number	Name	Registration Number
Bierman, Muserlian and Lucas	18,818		
Jordan B. Bierman	18,629		
Charles A. Muserlian	19,683		
Donald C. Lucas	31,275		

☐ Additional registered practitioner(s) named on a supplemental sheet attached hereto.

Direct all correspondence to:

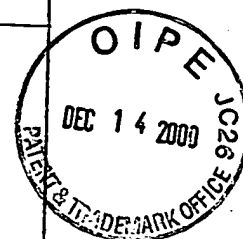
Name	Charles A. Muserlian		
Address	Bierman, Muserlian and Lucas		
Address	600 Third Avenue		
City	New York	State	NY
Country	U.S.A.	ZIP	10016
Telephone	(212) 661-8000	Fax	(212) 661-8002

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Name of Sole or First Inventor: ☐ A petition has been filed for this unsigned inventor

Given Name	Francine	Middle Initial		Family Name	JOLY	Suffix e.g. Jr.	
Inventor's Signature	JOLY				Date	11/ 27/00	
Residence: City	Paris	State		Country	France	Citizenship	France
Post Office Address	41, avenue du General Sarrail, 75016 Paris, France						
Post Office Address							
City	Paris	State		Zip	75016	Country	France

☒ Additional inventors are being named on supplemental sheet(s) attached hereto



RECEIVED

AUG 09 2001

TECH CENTER 1600/2900

Please type a plus sign (+) inside the box → ☐

PROCESSED: (P-25)
 Approved for use through 9/25/98 CWS 0651 0032
 Patent and Trademark Office, U.S. DEPARTMENT OF COMMERCE
 Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

DECLARATION

ADDITIONAL INVENTOR(S)
Supplemental Sheet

Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name	Francis	Middle Initial		Family Name	BEAUVAIS	Suffix	
Inventor's Signature	BEAUVAIS				Date	11/23/2000	
Residence: City	Sevres	State		Country	France	Citizenship	France
Post Office Address	91 Grande Rue, 92310 Sevres, France						
Post Office Address							
City	Sevres	State		Zip	92310	Country	France
Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name		Middle Initial		Family Name		Suffix	
Inventor's Signature					Date		
Residence: City		State		Country		Citizenship	
Post Office Address							
Post Office Address							
City		State		Zip		Country	
Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name		Middle Initial		Family Name		Suffix	
Inventor's Signature					Date		
Residence: City		State		Country		Citizenship	
Post Office Address							
Post Office Address							
City		State		Zip		Country	
Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name		Middle Initial		Family Name		Suffix	
Inventor's Signature					Date		
Residence: City		State		Country		Citizenship	
Post Office Address							
Post Office Address							
City		State		Zip		Country	
Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name		Middle Initial		Family Name		Suffix	
Inventor's Signature					Date		
Residence: City		State		Country		Citizenship	
Post Office Address							
Post Office Address							
City		State		Zip		Country	

☐ Additional inventors are being named on supplemental sheet(s) attached hereto.

Patent form a part of the (1) under the law ☒

Approved by the Patent 9,5076, CMB 0551-0037
 Patenting Trademark Office: U.S. DEPARTMENT OF COMMERCE
 Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION

☒ Declaration OR
Submitted
with Initial Filing

☐ Declaration
Submitted after
Initial Filing

Attorney Docket Number	GEI-082
First Named Inventor	JOLY et al
COMPLETE IF KNOWN	
Application Number	PCT/IB99/00862
Filing Date	May 12, 1999
Group Art Unit	
Examiner Name	

As a below named inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

**PHARMACEUTICAL, HYGIENIC AND/OR COSMETIC COMPOSITIONS
CONTAINING SEA WATER AND USES**

(Title of the invention)

The specification of which

☐ is attached hereto
OR

☒ was filed on (MM/DD/YYYY) 05/12/99

as United States Application Number or PCT International

Application Number: PCT/IB99/00862 and was amended on (MM/DD/YYYY) (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in Title 37 Code of Federal Regulations, §1.56.

I hereby claim foreign priority benefits under Title 35, United States Code §119 (a)-(d) or §365(b) of any foreign application(s) for patent or inventor's certificate, or §365 (a) of any PCT international application which designated at least one country other than the United States of America, filed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
98/06119	France	05/14/98	<input type="checkbox"/>	YES <input type="checkbox"/>	NO <input checked="" type="checkbox"/>
PCT/IB99/00862 PCT		05/12/99	<input type="checkbox"/>	YES <input type="checkbox"/>	NO <input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority sheet attached hereto:

I hereby claim the benefit under Title 35, United States Code §119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)	<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority sheet attached hereto.

(Page 1 of 5)

Burden Hour Statement: This form is estimated to take 0.4 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be attached hereto.

CONFIDENTIAL

Annex US.III, page 2

PCT Applicant's Guide - Volume II - National Chapter - US

ע... לוי'ס (ה) ויגד שיש בזה זכרון

十

Approved for release through E.O. 13526, 04/08/2001
 Patent and Trademark Office, U.S. DEPARTMENT OF COMMERCE
 Division of Information unless it contains a valid Copyright symbol

DECLARATION

I hereby claim the benefit under Title 35, United States Code § 120 of any United States application(s), or § 365(e) of any PCT international application designating the United States of America, filed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT international application in the manner provided by the first paragraph of Title 35, United States Code § 112, I acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulations § 1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.

U.S. Parent Application Number	PCT Parent Number	Parent Filing Date (MM/DD/YYYY)	Parent Patent Number (if applicable)

☐ Additional U.S. or PCT international application numbers are listed on a supplemental priority sheet attached hereto.

As a named inventor, I hereby appoint the following registered practitioner(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith:

Name	Registration Number	Name	Registration Number
Bierman, Muserlian and Lucas	18,818		
Jordan B. Bierman	18,629		
Charles A. Muserlian	19,683		
Donald C. Lucas	31,275		

☐ Additional registered practitioner(s) named on a supplemental sheet attached hereto.

Direct all correspondence to:

Name	Charles A. Muserlian				
Address	Bierman, Muserlian and Lucas				
Address	600 Third Avenue				
City	New York	State	NY	ZIP	10016
Country	U.S.A.	Telephone	(212) 661-8000	Fax	(212) 661-8002

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful falsifications and the lies so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Name of Sole or First Inventor:

☐ A petition has been filed for this unsigned inventor

Given Name	<u>Francine</u>	Middle Initial	Family Name	<u>JOLY</u>	Suffix e.g. Jr.
------------	-----------------	----------------	-------------	-------------	--------------------

Inventor's Signature	JOLY	Date	11/ 27/00
-------------------------	------	------	-----------

Reference: City	Paris	State	Country	France FRX	Citizenship	France
-----------------	-------	-------	---------	------------	-------------	--------

Post Office Address 41, avenue du General Sarraill, 75016 Paris, France

Post Office Address

City	Paris	State	Zip	75016	Country	France
------	-------	-------	-----	-------	---------	--------

☒ Additional inventors are being named on supplemental sheet(s) attached hereto

2021-2022

00-

